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ACN 068 673 871

July 24, 2001

Assistant Commissioner for Patents  
Office of Initial Patent Examination  
Customer Service Center  
WASHINGTON, DC 20231

**BY FACSIMILE**  
**(703) 308 7751**

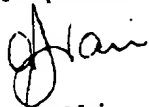
Attention: Office of Initial Patent Examination  
Customer Service Centre

Dear Sirs,

United States Patent Application Serial Number 09/854,703  
Inventors: Kia Silverbrook and Greg McAvoy  
Assignee: **SILVERBROOK RESEARCH PTY LTD**  
Title of Invention: Symmetric Ink Jet Apparatus  
Docket No: YU106US

We refer to the Notice To File Missing Parts of Nonprovisional Application received from your Office in respect of the above application and attach herewith the necessary fees.

Respectfully yours



Ana Nair  
Assistant to Kia Silverbrook

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## UNITED STATES PATENT AND TRADEMARK OFFICE

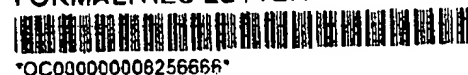
COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov

APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
09/854,703	05/14/2001	Kia Silverbrook	YU106US

24011  
SILVERBROOK RESEARCH PTY LTD  
393 DARLING STREET  
BALMAIN, 2041  
AUSTRALIA

CONFIRMATION NO. 9828

FORMALITIES LETTER



\*OC0000000825666\*

Date Mailed: 07/03/2001

## NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

*Filing Date Granted*

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The statutory basic filing fee is insufficient.  
*Applicant must submit \$ 10 to complete the basic filing fee and/or file a small entity statement claiming such status (37 CFR 1.27).*
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$65 for a small entity in compliance with 37 CFR 1.27, must be submitted with the missing items identified in this letter.
- The balance due by applicant is \$ 75.

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*A copy of this notice **MUST** be returned with the reply.*

  
Customer Service Center  
Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE


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Please type a plus sign (+) inside this box → ☐PTO/SB/21 (6-98)  
Approved for use through 09/30/2000. OMB 0651-0021  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	09/854,703
	Filing Date	May 14, 2001
	First Named Inventor	Kia Silverbrook
	Group Art Unit	2853
	Examiner Name	
Total Number of Pages in This Submission	Attorney Docket Number	YU106US

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input checked="" type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	I respectfully request the Examiner to contact me if any further fees are required:
<input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		Email: <a href="mailto:kia@silverbrook.com.au">kia@silverbrook.com.au</a> Telephone: 61-2-9818-6633 Facsimile: 61-2-9818-6711

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Kia Silverbrook c/- Silverbrook Research Pty. Ltd. 393 Darling Street, Balmain NSW 2041, Australia
Signature	
Date	July 24, 2001

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: <input type="text"/>	
Typed or printed name	Date
Signature	

Burdén Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the nature of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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P10/SB/1/ (09-00)

Approved for use through 10/31/2002. OMB 0831-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**FEE TRANSMITTAL  
for FY 2001**

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$)75

**Complete if Known**

Application Number	09/854,703
Filing Date	May 14, 2001
First Named Inventor	Kia Silverbrook
Examiner Name	
Group Art Unit	2053
Attorney Docket No.	YU106US

**METHOD OF PAYMENT**

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number: \_\_\_\_\_  
 Deposit Account Name: \_\_\_\_\_

☐ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☐ Applicant desires small entity status. See 37 CFR 1.27

2. ☒ Payment Enclosed:

☐ Check ☒ Credit card ☐ Money Order ☐ Other

**FEE CALCULATION****1. BASIC FILING FEE** *Invalid client call*

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101 710	201 355	Utility filing fee	
106 320	206 160	Design filing fee	
107 490	207 245	Plant filing fee	
108 710	208 355	Reissue filing fee	
114 150	214 75	Provisional filing fee	

SUBTOTAL (1) (\$)

**2. EXTRA CLAIM FEES**

Total Claims:  20\*\* -  X Fee from below:  Fee Paid:   
 Independent Claims:  - 3\*\* -  X    
 Multiple Dependent:

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
103 10	203 5	Claims in excess of 20	
102 80	202 40	Independent claims in excess of 3	
104 270	204 135	Multiple dependent claim, if not paid	
109 80	209 40	** Reissue independent claims over original patent	
110 10	210 5	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$)

\* Or number previously paid, if greater, for Reissue, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105 180	205 65	Surcharge - late filing fee or oath	
127 50	227 25	Surcharge - late provisional filing fee or cover sheet	
139 130	139 130	Non-English specification	
147 2,320	147 2,320	For filing a request for ex parte reexamination	
112 920*	112 920*	Requesting publication of SIR prior to Examiner action	
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action	
115 110	215 55	Extension for reply within first month	
116 390	216 195	Extension for reply within second month	
117 590	217 440	Extension for reply within third month	
118 1,390	218 695	Extension for reply within fourth month	
128 1,890	228 945	Extension for reply within fifth month	
119 310	219 155	Notice of Appeal	
120 310	220 155	Filing a brief in support of an appeal	
121 270	221 135	Request for oral hearing	
138 1,510	138 1,510	Petition to institute a public use proceeding	
140 110	240 55	Petition to revive - unintentional	
141 1,240	241 620	Petition to revive - unintentional	
142 1,240	242 620	Utility issue fee (or reissue)	
143 440	243 220	Design issue fee	
144 600	244 300	Plant issue fee	
122 130	122 130	Petitions to the Commissioner	
123 50	123 50	Petitions related to provisional applications	
126 240	126 240	Submission of Information Disclosure Sheet	
581 40	581 40	Recording each patent assignment per property (times number of properties)	
145 710	245 355	Filing a submission after final rejection (37 CFR § 1.129(a))	
149 710	249 355	For each additional invention to be examined (37 CFR § 1.129(b))	
179 710	279 355	Request for Continued Examination (RCE)	
168 900	168 900	Request for expedited examination of a Design Application	
Other fee (specify) <u>Response to Missing Parts</u>			75

\* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 75

**SUBMITTED BY**

Name (Print/Type)

Kia Silverbrook

Registration No. (Attorney/Agent)

Telephone

+61-2-9818-6633

Signature

Date

July 24, 2001

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PTO-2038 (02-2000)

Approved for use through 01/31/2003. OMB 0651-0043

United States Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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## United States Patent &amp; Trademark Office

## Credit Card Payment Form

Please Read Instructions before Completing this Form

## Credit Card Information

Credit Card Type:	Visa	<u>MasterCard</u>	American Express	Discover
Credit Card Account #:	<u>Invalid CC. can't call</u> <u>customer out of country</u>			
Credit Card Expiration Date:	04/03			
Name as it Appears on Credit Card:	Loretta K Craig			
Payment Amount: \$(US Dollars):	\$75			
Signature:	Date: July 24, 2001			
<small>Refund Policy: The Office may refund a fee paid by mistake or in excess of that required. A change of purpose after the payment of a fee will not entitle a party to a refund of such fee. The Office will not refund amounts of twenty-five dollars or less unless a refund is specifically requested, and will not notify the payor of such amounts (37 CFR 1.26). Refund of a fee paid by credit card will be via credit to the credit card account.</small>				
<small>Service Charge: There is a \$0.00 service charge for processing each payment refused (including a check returned "unpaid") or charged back by a financial institution (37 CFR 1.21(m)).</small>				

## Credit Card Billing Address

Street Address 1:	393 Darling Street		
Street Address 2:			
City:	Balmain	Zip/Postal Code:	2041
State:	NSW		
Country:	Australia		
Daytime Phone #:	+61 2 98186833	Fax #:	+61 2 98186711

## Request and Payment Information

Description of Request and Payment Information:

Patent Fee	Patent Maintenance Fee	Trademark Fee	Other Fee
Application No.	Application No.	Serial No.	IDON Customer No.
09/054,703		Registration No.	Notice of Missing Parts mailed 7/3/01
Patent No.	Patent No.	Identify or Describe Mark	
Attorney Docket No.			
YU106US			

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